



**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing  
OR  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number J-3862

First Named Inventor Douglas A. Soller

**COMPLETE IF KNOWN**

Application Number 10/615,178

Filing Date July 8, 2003

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CLEANING BRUSH WITH DISPOSABLE/REPLACEABLE BRUSH HEAD

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 07/08/2003 as United States Application Number or PCT International

Application Number 10/615,178 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label **28165** OR ☐ Correspondence address below

Name Ms. Linda Blair Meier



Address c/o S.C. Johnson & Són, Inc.

**28165**  
PATENT TRADEMARK OFFICE

Address 1525 Howe Street

City Racine

State Wisconsin

ZIP 53403

Country USA

Telephone 262-260-2000 x2474

Fax 262-260-4253

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name Douglas A.  
(first and middle [if any])

Family Name Soller  
or Surname

Inventor's  
Signature

*Douglas A. Soller*

Date 7-28-2003

Residence: City Racine

State WI

Country USA

Citizenship U.S.

Mailing Address 2729 Chapel Lane

Mailing Address

City Racine

State Wisconsin

ZIP 53406

Country U.S.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Simon M.  
(first and middle [if any])

Family Name Conway  
or Surname

Inventor's  
Signature

*Simon M. Conway*

Date 8/6/03

Residence: City Burlington

State WI

Country US

Citizenship US

Mailing Address 6207 Jones Road

Mailing Address

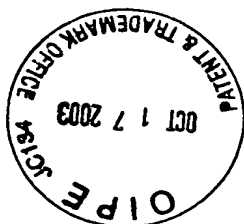
City Burlington

State Wisconsin

ZIP 53105

Country USA

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)


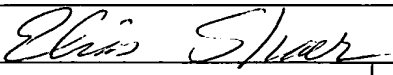

Approved for use through 10/31/2002.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kenneth W.		Michaels	
Inventor's Signature 		Date 8/7/03	
Residence: City Spring Grove	State IL	Country USA	Citizenship US
Mailing Address 208 Baron Drive			
Mailing Address			
City Spring Grove	State IL	ZIP 60082	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Elias H.		Shaer	
Inventor's Signature 		Date 7/29/03	
Residence: City San Antonio	State TX	Country USA	Citizenship US
Mailing Address 14630 Cadillac Drive			
Mailing Address			
City San Antonio	State TX	ZIP 78248	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael J.		Banco	
Inventor's Signature 		Date 8/7/03	
Residence: City Racine	State WI	Country USA	Citizenship US
Mailing Address 5428 River Hills Road			
Mailing Address			
City Racine	State WI	ZIP 53402	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

MKE15436538

Please type a plus sign (+) inside this box → ☐

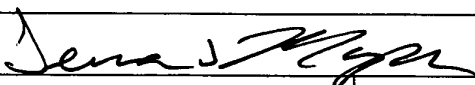
PTO/SB/02A (11-00)

Approved for use through 10/31/2002.

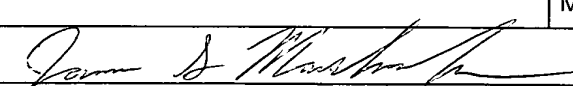
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>2</u> of <u>2</u>
--------------------	---

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Terra J.		Morgan	
Inventor's Signature 		Date <u>7-26-03</u>	
Residence: City Oak Creek	State WI	Country USA	Citizenship US
Mailing Address 9332 S. Orchard Park Circle			
Mailing Address Apartment 3A			
City Oak Creek	State WI	ZIP 53154	Country USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James S.		Marschalek	
Inventor's Signature 		Date <u>8-4-03</u>	
Residence: City Hartland	State WI	Country USA	Citizenship US
Mailing Address 210 Nixon Avenue			
Mailing Address			
City Hartland	State WI	ZIP 53029	Country USA

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

MKE\5436543